

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 09, 2008 08:00 A**  
**Secretary of State**

**DOCUMENT # P04000124433**

**1. Entity Name**  
**ADVANTAGE GROUP AMERICA, INC.**



**Principal Place of Business**  
**10775 TEA OLIVE LANE**  
**BOCA RATON, FL 33498**

**Mailing Address**  
**10775 TEA OLIVE LANE**  
**BOCA RATON, FL 33498**



**04032008 No Chg-P CR2E034 (11/05)**

**DO NOT WRITE IN THIS SPACE**

**4. FEI Number**  
**20-1579057**

**Applied For**  
**Not Applicable**

**5. Certificate of Status Desired** ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**STARK, STEVEN**  
**10775 TEA OLIVE LANE**  
**BOCA RATON, FL 33498**

**DO NOT WRITE  
IN THIS SPACE**

**8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.**

**SIGNATURE**

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reconstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

**9. Election Campaign Financing** ☐ **\$5.00 May Be Added to Fees**  
**Trust Fund Contribution.**

**UN00000888072**  
**04/21/08-80045-019 150.00**

**10. OFFICERS AND DIRECTORS**

**TITLE** **P**  
**NAME** **STARK, STEVEN**  
**STREET ADDRESS** **10775 TEA OLIVE LANE**  
**CITY - ST - ZIP** **BOCA RATON, FL 33498**

**TITLE**  
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**12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.**

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/4/08**

Date

Daytime Phone #